Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF OKLAHOMA	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself				
		About Debtor 1:	,	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name				
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	William First name Eric Middle name Summers Last name and Suffix (Sr., Jr., II, III)		Shawnna First name Renee Middle name Summers Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years Include your married or maiden names.			FKA Shawnna Renee Conner FKA Shawnna Renee Anderson	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5575	3	xxx-xx-4535	

Debtor 1 William Eric Summers
Debtor 2 Shawnna Renee Summers Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	■ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	7737 S Mingo Rd #924	If Debtor 2 lives at a different address:			
		Tulsa, OK 74133 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Tulsa				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. 			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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	otor 2 Shawnna Renee S					Case number (if known)	
Par	t 2: Tell the Court About	rour Bankr	uptcy Cas	se			
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy					
	choosing to file under	■ Chapte	er 7				
		☐ Chapte	er 11				
		☐ Chapte	er 12				
		☐ Chapte	er 13				
8.	How you will pay the fee	abo orde a pr	ut how you er. If your a e-printed a	u may pay. Typically, if gattorney is submitting your address.	you are paying the fee your payment on your be	eck with the clerk's office in your local court for more deta yourself, you may pay with cash, cashier's check, or mon half, your attorney may pay with a credit card or check w	ey ith
				the fee in installment in Installments (Officia		tion, sign and attach the Application for Individuals to Pa	/
		but app	s not requi	iired to, waive your fee, r family size and you ar	and may do so only if ye unable to pay the fee	on only if you are filing for Chapter 7. By law, a judge ma your income is less than 150% of the official poverty line to in installments). If you choose this option, you must fill official Form 103B) and file it with your petition.	hat
9.	Have you filed for						
Э.	bankruptcy within the	■ No.					
	last 8 years?	☐ Yes.	District		10//-	Occasional de la constantina	
			District		When When	Case number Case number	
			District District		When	Case number	
10.	Are any bankruptcy	■ No					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	□ No.	Go to lir	ne 12.			
	residence:	Yes.	Has you	ur landlord obtained an	eviction judgment agair	nst you and do you want to stay in your residence?	
				No. Go to line 12.			
				Yes. Fill out <i>Initial State</i> bankruptcy petition.	ement About an Evictior	n Judgment Against You (Form 101A) and file it with this	

Case 16-11268-R Document 1 Filed in USBC ND/OK on 07/18/16 Page 4 of 66

	otor 1 otor 2	William Eric Summ Shawnna Renee S					Ca	ase number (if known)	
Par	t 3:	Report About Any Bu	sinesses `	You Own	as a Sole Proprie	tor			
12.	of an	ou a sole proprietor y full- or part-time ness?	■ No.	Go to	Part 4.				
			☐ Yes.	Name	and location of bus	siness			
	busin an ind separ as a d	e proprietorship is a less you operate as dividual, and is not a rate legal entity such corporation, ership, or LLC.		Name	of business, if any				
	If you sole p	have more than one proprietorship, use a rate sheet and attach		Numbe	er, Street, City, Sta	te & ZIP Code)		
		nis petition.		Check	the appropriate bo	ox to describe	your business:		
					Health Care Busin	ness (as defin	ed in 11 U.S.C. § 10	01(27A))	
					Single Asset Real	l Estate (as de	fined in 11 U.S.C. §	§ 101(51B))	
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))									
					Commodity Broke	er (as defined	in 11 U.S.C. § 101(6	6))	
					None of the above	е			
13.	Chap Bank	rou filing under oter 11 of the truptcy Code and are a s <i>mall busin</i> ess or?	deadlines	s. If you inc s, cash-flo	dicate that you are by statement, and t	a small busine	ess debtor, you mus	e a small business debtor so the st attach your most recent bala of these documents do not ex	ance sheet, statement of
	For a	definition of small	No.	I am n	ot filing under Chap	oter 11.			
	busin	ness debtor, see 11 C. § 101(51D).	□ No.	I am fil Code.	ing under Chapter	11, but I am N	NOT a small busines	ss debtor according to the defi	inition in the Bankruptcy
			☐ Yes.	I am fil	ing under Chapter	11 and I am a	small business del	btor according to the definition	in the Bankruptcy Code.
Par	t 4:	Report if You Own or	Have Any	Hazardo	us Property or An	y Property TI	nat Needs Immedia	ate Attention	
14.	prop	ou own or have any erty that poses or is ed to pose a threat minent and	■ No.	What is t	he hazard?				
	identifiable hazard to public health or safety? Or do you own any property that needs				ate attention is why is it needed?				
		ediate attention?		,	,	-			
	perisi livest or a b	xample, do you own hable goods, or ock that must be fed, building that needs ht repairs?		Where is	the property?				
	-	•				Number, Stree	et, City, State & Zip Co	ode	

Case 16-11268-R Document 1 Filed in USBC ND/OK on 07/18/16 Page 5 of 66 Debtor 1 William Eric Summers Debtor 2 **Shawnna Renee Summers** Case number (if known) Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 15. Tell the court whether You must check one: You must check one: you have received a I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed briefing about credit counseling agency within the 180 days before I counseling. filed this bankruptcy petition, and I received a this bankruptcy petition, and I received a certificate of certificate of completion. completion. The law requires that you Attach a copy of the certificate and the payment plan, if Attach a copy of the certificate and the payment receive a briefing about plan, if any, that you developed with the agency. any, that you developed with the agency. credit counseling before you file for bankruptcy. I received a briefing from an approved credit I received a briefing from an approved credit You must truthfully check counseling agency within the 180 days before I one of the following counseling agency within the 180 days before I filed filed this bankruptcy petition, but I do not have this bankruptcy petition, but I do not have a certificate choices. If you cannot do a certificate of completion. so, you are not eligible to of completion. file. Within 14 days after you file this bankruptcy Within 14 days after you file this bankruptcy petition, you petition, you MUST file a copy of the certificate and MUST file a copy of the certificate and payment plan, if If you file anyway, the court payment plan, if any. can dismiss your case, you will lose whatever filing fee I certify that I asked for credit counseling ☐ I certify that I asked for credit counseling services you paid, and your services from an approved agency, but was from an approved agency, but was unable to obtain creditors can begin unable to obtain those services during the 7 those services during the 7 days after I made my collection activities again. request, and exigent circumstances merit a 30-day days after I made my request, and exigent circumstances merit a 30-day temporary waiver temporary waiver of the requirement. of the requirement. To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the attach a separate sheet explaining what efforts you made requirement, attach a separate sheet explaining to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for circumstances required you to file this case. bankruptcy, and what exigent circumstances Your case may be dismissed if the court is dissatisfied required you to file this case. with your reasons for not receiving a briefing before you Your case may be dismissed if the court is filed for bankruptcy. dissatisfied with your reasons for not receiving a If the court is satisfied with your reasons, you must still briefing before you filed for bankruptcy. receive a briefing within 30 days after you file. You must If the court is satisfied with your reasons, you must file a certificate from the approved agency, along with a still receive a briefing within 30 days after you file. copy of the payment plan you developed, if any. If you do You must file a certificate from the approved not do so, your case may be dismissed. agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case Any extension of the 30-day deadline is granted only for may be dismissed. cause and is limited to a maximum of 15 days. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about I am not required to receive a briefing about credit credit counseling because of: counseling because of: Incapacity. Incapacity. I have a mental illness or a mental deficiency I have a mental illness or a mental deficiency that that makes me incapable of realizing or makes me incapable of realizing or making rational making rational decisions about finances. decisions about finances. Disability. Disability. My physical disability causes me to be My physical disability causes me to be unable to unable to participate in a briefing in person, participate in a briefing in person, by phone, or by phone, or through the internet, even after I through the internet, even after I reasonably tried to reasonably tried to do so. do so.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

I am currently on active military duty in a

Active duty.

military combat zone.

П

Voluntary Petition for Individuals Filing for Bankruptcy

Active duty.

combat zone.

of credit counseling with the court.

I am currently on active military duty in a military

If you believe you are not required to receive a briefing

about credit counseling, you must file a motion for waiver

	tor 1 William Eric Sumi				Case nu	umber (if known)			
Part	6: Answer These Quest	ions for R	eporting Purposes						
	What kind of debts do you have?	16a.							
	you navo:		□ No. Go to line 16b.						
			■ Yes. Go to line 17.						
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you owe th	at are not consumer	debts or bus	siness debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	o to line 18.					
	Do you estimate that after any exempt property is excluded and	Yes.		I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?					
	administrative expenses are paid that funds will		■ No						
	be available for distribution to unsecured creditors?		☐ Yes						
18.	How many Creditors do	1 -49		1 ,000-5,000		2 5,001-50,000			
	you estimate that you owe?	□ 50-99		☐ 5001-10,000 ☐ 40,004,05,000		□ 50,001-100,000			
		□ 100-1 □ 200-9		☐ 10,001-25,000		☐ More than100,000			
19.	How much do you	□ \$50,001 - \$100,000 □ \$1		□ \$1,000,001 - \$1	0 million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?			□ \$10,000,001 - \$ □ \$50,000,001 - \$		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion			
		□ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$100,000,001 - \$500 million					
20.	How much do you	□ \$0 - \$	•	1 \$1,000,001 - \$1		□ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?	_	001 - \$100,000	□ \$10,000,001 - \$		□ \$1,000,000,001 - \$10 billion			
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$ □ \$100,000,001 - \$		□ \$10,000,000,001 - \$50 billion □ More than \$50 billion			
Part	7: Sign Below								
For	you	I have ex	ramined this petition, and I declare u	under penalty of perju	ury that the in	information provided is true and correct.			
						gible, under Chapter 7, 11,12, or 13 of title 1 d I choose to proceed under Chapter 7.	1,		
			rney represents me and I did not pa nt, I have obtained and read the noti			is not an attorney to help me fill out this o).			
		I request	relief in accordance with the chapte	er of title 11, United S	States Code,	, specified in this petition.			
			derstand making a false statement, concealing property, or obtaining money or property by fraud in connection with a struptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519						
		/s/ Willi	am Eric Summers			a Renee Summers			
			Eric Summers e of Debtor 1		nawnna Re gnature of De	enee Summers Debtor 2			
		Executed	d on July 12, 2016	Fy	ecuted on	July 12, 2016			
		LAGOUIOC	MM / DD / YYYY		_	MM / DD / YYYY			

Debtor 1 Debtor 2	William Eric Sum Shawnna Renee S		se number (if known)				
•	attorney, if you are ed by one	under Chapter 7, 11, 12, or 13 of title 11, Unit	ted States Code, and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)			
•	not represented by ey, you do not need a page.	and, in a case in which § 707(b)(4)(D) applie schedules filed with the petition is incorrect.	es, certify that I have no knowledge after an inquiry that the information in the				
		/s/ Paul R. Tom	Date	July 12, 2016			
		Signature of Attorney for Debtor		MM / DD / YYYY			
		Paul R. Tom					
		Printed name					
		Paul R. Tom, Attorney at Law Firm name					
		2727 E. 21st Street, Ste 604 Tulsa, OK 74114					
		Number, Street, City, State & ZIP Code					
		Contact phone 918-743-2000	Email address	paultom@tax-amnesty.com			
		#9049					
		Bar number & State		<u> </u>			

Ħ	in this information to identify your case:		
	otor 1 William Eric Summers		
Dok	First Name Middle Name Last Name otor 2 Shawnna Renee Summers		
	use if, filing) First Name Middle Name Last Name		
Uni	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF OKLAHOMA		
	se numberown)	_	k if this is an nded filing
			Ç
Эf	ficial Form 106Sum		
Su	mmary of Your Assets and Liabilities and Certain Statistical Information		12/15
nfo	is complete and accurate as possible. If two married people are filing together, both are equally responsible rmation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend or original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	t 1: Summarize Your Assets		
		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	27,812.00
	1c. Copy line 63, Total of all property on Schedule A/B	•	<u> </u>
		\$	27,812.00
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	75,844.96
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	188,848.05
	Your total liabilities	\$	264,693.01
Par	t 3: Summarize Your Income and Expenses		
1 a1 4.	·		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,772.47
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,828.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your content of	our other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily fo household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	· a persona	l, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check the court with your other schedules.	is box and s	submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

William Eric Summers Debtor 2 **Shawnna Renee Summers** Case number (if known)

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

3,011.52

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	75,844.96
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	75,844.96

Debtor 1

Fill in this inforr	nation to identify your cas	se and this filing:		
Debtor 1	William Eric Summe			
	First Name	Middle Name Last Name		
Debtor 2 (Spouse, if filing)	Shawnna Renee Su First Name	mmers Middle Name Last Name		
	alonomican Occord for the Nie			
United States Ba	nkruptcy Court for the: No	ORTHERN DISTRICT OF OKLAHOMA		
Case number _				☐ Check if this is an
				amended filing
Official Fo	rm 106A/B			
		w4.,		
	e A/B: Prope			12/15
think it fits best. B	e as complete and accurate a e space is needed, attach a s	ems. List an asset only once. If an asset fits in more than one than one than one than one than one of the sound that are the sound that are the sound that the sound that are the sound	are equally responsible for sup	oplying correct
Part 1: Describe	Each Residence, Building, La	and, or Other Real Estate You Own or Have an Interest In		
200011110		, 0. 0.1.0. 1.0.1 2.1.10 1.0.1 0.1.10 1.1.10 1.1.11		
1. Do you own or h	nave any legal or equitable in	terest in any residence, building, land, or similar property?		
■ No. Go to Par	t 2.			
☐ Yes. Where is	s the property?			
Part 2: Describe	Your Vehicles			
3. Cars, vans, tro	ucks, tractors, sport utility	also report it on Schedule G: Executory Contracts and L y vehicles, motorcycles	мохриса Есавос.	
Yes				
O.A. Malaa	Toyota	Who has an interest in the manner of a	Do not deduct secured cla	ims or exemptions. Put
-	Sienna	Who has an interest in the property? Check one	the amount of any secured Creditors Who Have Clain	
	2004	☐ Debtor 1 only		
Approximat		□ Debtor 2 only 0 □ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
Other inform		At least one of the debtors and another		, , , , , , , , , , , , , , , , , , , ,
			40.050.00	40.050.00
		Check if this is community property (see instructions)	\$2,250.00	\$2,250.00
Examples: Boar No Yes Add the dolla pages you hat Part 3: Describe Do you own or h	ts, trailers, motors, personal or value of the portion you nve attached for Part 2. Wi Your Personal and Househo nave any legal or equitable	s and other recreational vehicles, other vehicles, and watercraft, fishing vessels, snowmobiles, motorcycle at own for all of your entries from Part 2, including arrite that number here	ny entries for	\$2,250.00 Current value of the cortion you own? To not deduct secured laims or exemptions.
	oods and furnishings ujor appliances, furniture, lin	ens, china, kitchenware		

Debtor 1 Debtor 2	William Eric Shawnna R	Summers enee Summers		Case number (if known)	
■ Yes.	. Describe				
		Misc Household Goods and Furni	shings		\$6,000.00
□ No	les: Televisions	and radios; audio, video, stereo, and digital I phones, cameras, media players, games	equipment; computers, pri	nters, scanners; music collect	ions; electronic devices
		Laptop			\$150.00
Examp		figurines; paintings, prints, or other artworkions, memorabilia, collectibles	k; books, pictures, or other	art objects; stamp, coin, or ba	aseball card collections;
Examp No	nent for sports a ples: Sports, phot musical inst	ographic, exercise, and other hobby equipm	nent; bicycles, pool tables,	golf clubs, skis; canoes and k	ayaks; carpentry tools;
■ No		s, shotguns, ammunition, and related equip	oment		
□ No		lothes, furs, leather coats, designer wear, s	hoes, accessories		
		Misc Clothing and accessories			\$500.00
□ No		ewelry, costume jewelry, engagement rings, Wedding Band	wedding rings, heirloom je	ewelry, watches, gems, gold, s	silver \$50.00
		Wedding Ring			\$1,500.00
		Misc Costume Jewelry			\$150.00
Exam ■ No □ Yes.	arm animals ples: Dogs, cats, Describe	birds, horses nd household items you did not already l	list including any boalsh	aids you did not list	
■ No	. Give specific in		not, moraumy any neatti	aido you did fiot fist	

Debt Debt		William Eric Shawnna Re	Summers nee Summers	Case number (if known,	
15.				Part 3, including any entries for pages you have attached	\$8,350.00
Part -	4: Des	scribe Your Finan	cial Assets		
Do y	ou ow	n or have any lo	egal or equitable interest ir	n any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	No		nave in your wallet, in your h	ome, in a safe deposit box, and on hand when you file your peti	ion
				counts; certificates of deposit; shares in credit unions, brokerage s with the same institution, list each.	houses, and other similar
				Institution name:	
			17.1. Checking	Oklahoma Central Credit Union	\$12.00
	No .	oles: Bond funds,	investment accounts with br Institution or issuer	rokerage firms, money market accounts	
19. N	lon-pu		ock and interests in incorp	porated and unincorporated businesses, including an intere	st in an LLC, partnership, an
	No				
	l Yes.	Give specific info	ormation about them Name of entity:	% of ownership:	
_	Negotia	able instruments	include personal checks, ca	otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.	
		Give specific info	rmation about them Issuer name:		
		nent or pension oles: Interests in I		403(b), thrift savings accounts, or other pension or profit-sharing	g plans
		List each accoun	t separately. Type of account:	Institution name:	
_	Your sl		d deposits you have made so	o that you may continue service or use from a company public utilities (electric, gas, water), telecommunications compa	unies, or others
				Institution name or individual:	
			Rental deposit	Security Deposit: Security Deposit Held By Landlord Estancia Apartments	\$200.00
23. <i>F</i>	\nnuiti	ies (A contract fo	r a periodic payment of mon	ney to you, either for life or for a number of years)	
	No	•	suer name and description.		
24. I n	nterest	s in an education	on IRA, in an account in a c	qualified ABLE program, or under a qualified state tuition pr	ogram.

Debtor 2		S	Case number (if known)	
	S.C. §§ 530(b)(1), 529A(b), and 529	9(b)(1).		
■ No		nd description. Separately file the records of any inte	erests.11 U.S.C. § 521(c):	
25. Trus ■ No	•	property (other than anything listed in line 1), a	nd rights or powers exercisab	ole for your benefit
□ Ye	es. Give specific information about the	nem		
	imples: Internet domain names, web	e secrets, and other intellectual property sites, proceeds from royalties and licensing agreem	nents	
	es. Give specific information about the	hem		
Exa ■ No		censes, cooperative association holdings, liquor lice	enses, professional licenses	
□Y€	es. Give specific information about the	nem		
Money	or property owed to you?		p D	Current value of the cortion you own? On not deduct secured claims or exemptions.
28. Tax	refunds owed to you			
■ No				
Ll Y€	es. Give specific information about the	em, including whether you already filed the returns	and the tax years	
Exa	•	ny, spousal support, child support, maintenance, div	vorce settlement, property settler	ment
Exa	amples: Past due or lump sum alimor	child Support: Christopher Conner has not paid child support.	vorce settlement, property settler	ment \$17,000.00
Exa No. No.	er amounts someone owes you benefits; unpaid loans you melits; unpaid loans you melitary the melitary was all more than the melitary was all melitary was all melitary was all melitary was all more than the melitary was all melitary was a	Child Support: Christopher Conner has not paid child support.	Child Support	<u></u> \$17,000.00
Exa	er amounts someone owes you benefits; unpaid loans you must solve specific information	Child Support: Christopher Conner has not paid child support.	Child Support ion pay, workers' compensation	<u></u> \$17,000.00
Exa □ No ■ Ye 30. Other Exa □ No □ Ye 31. Intel Exa ■ No	er amounts someone owes you benefits; unpaid loans you must solve specific information	Child Support: Christopher Conner has not paid child support. Trance payments, disability benefits, sick pay, vacationade to someone else Trance; health savings account (HSA); credit, homeone each policy and list its value.	Child Support ion pay, workers' compensation wner's, or renter's insurance	<u></u> \$17,000.00
Exa □ No ■ Ye 30. Othle Exa □ No □ Ye 31. Intel Exa □ No □ Ye 32. Any If you som	er amounts someone owes you amples: Unpaid wages, disability insubenefits; unpaid loans you must be seed in insurance policies amples: Health, disability, or life insurance company of Com	Child Support: Christopher Conner has not paid child support. Trance payments, disability benefits, sick pay, vacationade to someone else Trance; health savings account (HSA); credit, homeone each policy and list its value. Benefic	Child Support ion pay, workers' compensation wner's, or renter's insurance ciary:	\$17,000.00 In Social Security Surrender or refund value:
Exa □ No ■ Ye 30. Other Exa □ No □ Ye 31. Intel Exa □ No □ Ye 32. Any If you som	er amounts someone owes you amples: Unpaid wages, disability insubenefits; unpaid loans you must be seed in insurance policies amples: Health, disability, or life insurance company of Com	Child Support: Christopher Conner has not paid child support. Trance payments, disability benefits, sick pay, vacationade to someone else Trance; health savings account (HSA); credit, homeone each policy and list its value. The part of the par	Child Support ion pay, workers' compensation wner's, or renter's insurance ciary:	\$17,000.00 In Social Security Surrender or refund value:
Exa	er amounts someone owes you amples: Unpaid wages, disability insubenefits; unpaid loans you multiples. Give specific information Tests in insurance policies amples: Health, disability, or life insurance. Company of C	Child Support: Christopher Conner has not paid child support. Trance payments, disability benefits, sick pay, vacationade to someone else Trance; health savings account (HSA); credit, homeone each policy and list its value. The part of the par	Child Support ion pay, workers' compensation wner's, or renter's insurance ciary:	\$17,000.00 In Social Security Surrender or refund value:

Debi			Case number (if known)	
	Other contingent and unliquidated claims of every nature I	e, including counterclaims	of the debtor and rights to	set off claims
	Yes. Describe each claim			
_	Any financial assets you did not already list I No			
	Yes. Give specific information			
36.	Add the dollar value of all of your entries from Part 4, in for Part 4. Write that number here			\$17,212.00
Part	5: Describe Any Business-Related Property You Own or Have	an Interest In. List any real es	tate in Part 1.	
	o you own or have any legal or equitable interest in any busine	ss-related property?		
_	No. Go to Part 6. Yes. Go to line 38.			
Part	6: Describe Any Farm- and Commercial Fishing-Related Property on the own or have an interest in farmland, list it in Part 1.	erty You Own or Have an Intere	est In.	
46. [Do you own or have any legal or equitable interest in any	/ farm- or commercial fishi	ing-related property?	
	No. Go to Part 7.			
	☐ Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an Interest in	hat You Did Not List Above		
_	Oo you have other property of any kind you did not alreat Examples: Season tickets, country club membership	dy list?		
	No I Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. V	/rite that number here		\$0.00
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$2,250.00		
57.	Part 3: Total personal and household items, line 15	\$8,350.00		
58.	Part 4: Total financial assets, line 36	\$17,212.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 7: Total other property not listed, line 54	\$0.00		
61.	Part 7: Total other property not listed, line 54	+\$0.00		
62.	Total personal property. Add lines 56 through 61	\$27,812.00	Copy personal property to	otal \$27,812.00
63.	Total of all property on Schedule A/B. Add line 55 + line	62		\$27,812.00

Fill in this infor	mation to identify your	case:		
Debtor 1	William Eric Sum	mers		
	First Name	Middle Name	Last Name	
Debtor 2	Shawnna Renee	Summers		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OKLAHOMA	
Case number (if known)				☐ Check if this is an
(amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2004 Toyota Sienna 170,000 miles Line from <i>Schedule A/B</i> : 3.1	\$2,250.00		\$2,250.00	Okla. Stat. tit. 31, § 1(A)(13
Ellie Hoff Gorleddie 742. Gri			100% of fair market value, up to any applicable statutory limit	
Misc Household Goods and Furnishings	\$6,000.00		\$6,000.00	Okla. Stat. tit. 31, § 1(A)(3)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Misc Clothing and accessories Line from Schedule A/B: 11.1	\$500.00		\$500.00	Okla. Stat. tit. 31, § 1(A)(7)
Ellio IIoni osiiodalo 702.			100% of fair market value, up to any applicable statutory limit	
Wedding Band Line from Schedule A/B: 12.1	\$50.00		\$50.00	Okla. Stat. tit. 31, § 1(A)(8)
Ellio II olii osiiodalo 702. 1211			100% of fair market value, up to any applicable statutory limit	
Wedding Ring Line from Schedule A/B: 12.2	\$1,500.00		\$1,500.00	Okla. Stat. tit. 31, § 1(A)(8)
LING HOTH GUNEGULE FAD. 12.2			100% of fair market value, up to any applicable statutory limit	

Debtor Debtor		/illiam Eric Summers hawnna Renee Summers			Case number (if known)	
		cription of the property and line on e A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	necki nion	ng: Oklahoma Central Credit	\$12.00	\$12.00 ■ \$12.00		Okla. Stat. tit. 12, § 1171.1;
		n <i>Schedule A/B</i> : 17.1			100% of fair market value, up to any applicable statutory limit	Okla. Stat. tit. 31, § 1(A)(18)
		Support: Child Support:	\$17,000.00		\$17,000.00	Okla. Stat. tit. 12, § 1171.2(A); Okla. Stat. tit. 31, § 1(A)(19)
ch	Christopher Conner has not paid child support. Line from Schedule A/B: 29.1				100% of fair market value, up to any applicable statutory limit	Okia. Stat. III. 31, 3 1(A)(13)
	•	claiming a homestead exemption to adjustment on 4/01/19 and every			ed on or after the date of adjustmer	nt.)
	Yes	s. Did you acquire the property covere	ed by the exemption wi	thin 1,	215 days before you filed this case	?
		No				
		Yes				

Fill in this informa	ation to identify your	case:		
Debtor 1	William Eric Sum			
	First Name	Middle Name	Last Name	
Debtor 2	Shawnna Renee S	Summers		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bank	kruptcy Court for the:	NORTHERN DISTRICT	OF OKLAHOMA	
Case number				☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

Fi	I in this inform	ation to identify your	case:					
De	ebtor 1	William Eric Sum	mers					
		First Name	Middle Name	Last Name				
1 1	ebtor 2	Shawnna Renee						
(Sp	ouse if, filing)	First Name	Middle Name	Last Name				
Ur	nited States Ban	kruptcy Court for the:	NORTHERN DISTRI	CT OF OKLAHOMA				
Ca	ase number							
(if k	known)						Check if	this is an
						a	mended	d filing
Ωf	ficial Form	106E/E						
			ho Have Unse	cured Claims				12/15
				PRIORITY claims and Part 2 for	or oraditors with NON	IDDIODITY olo	ima List	
Sch left. nan	nedule D: Creditor Attach the Contine and case numl	rs Who Have Claims Sec nuation Page to this pag ber (if known).	ured by Property. If more ge. If you have no informa	n 106G). Do not include any cre space is needed, copy the Par tion to report in a Part, do not	t you need, fill it out,	number the en	tries in t	he boxes on the
		of Your PRIORITY Ur						
1.	No. Go to Pa	s have priority unsecure	a ciaims against you?					
		π 2.						
_	Yes.			an one priority unsecured claim, li			_	
	identify what type possible, list the Part 1. If more th	e of claim it is. If a claim ha claims in alphabetical orde an one creditor holds a pa	as both priority and nonprior er according to the creditor articular claim, list the other	rity amounts, list that claim here a s name. If you have more than tw	and show both priority a wo priority unsecured cl	and nonpriority a laims, fill out the	amounts. Continua	As much as ation Page of
					Total claim	Priority amount		Nonpriority amount
2.1	Internal I	Revenue Service	Last 4 digits	s of account number	\$75,844.96		0.00	\$75,844.96
		ditor's Name						- +1
	PO Box 2	-	When was t	he debt incurred?		_		
		ohia, PA 19114 eet City State Zlp Code	As of the da	te you file, the claim is: Check a	all that annly			
		the debt? Check one.	☐ Continge	•	ан шасарру			
	Debtor 1 on	lv	_					
	_	•	☐ Unliquida	ted				
	Debtor 2 on	ly	☐ Disputed					
	Debtor 1 an	d Debtor 2 only	<u></u> '	ORITY unsecured claim:				
	At least one	of the debtors and another	er	support obligations				
	☐ Check if th	is claim is for a commu	nity debt Taxes an	d certain other debts you owe the	government			
	Is the claim su	bject to offset?	☐ Claims fo	r death or personal injury while yo	ou were intoxicated			
	■ No		Other. Sp	pecify				
	☐ Yes		·	From 2009 joint fili		and. Result	of	
				his business being	g audited			
Pa	rt 2: List All	of Your NONPRIORIT	Y Unsecured Claims					
			cured claims against you	?				
	_		5 ,	court with your other schedules.				
	Yes.							
4.	unsecured claim	, list the creditor separatel	y for each claim. For each	order of the creditor who holds claim listed, identify what type of rt 3.lf you have more than three r	claim it is. Do not list cl	aims already inc	cluded in	Part 1. If more

Official Form 106 E/F

Total claim

Debto Debto	or 1 William Eric Summers Or 2 Shawnna Renee Summers		Case number (if know)	
4.1	AFC/Doctors Express	Last 4 digits of account number	8800	\$152.43
	Nonpriority Creditor's Name 3161 N Rock Rd. Ste A Wichita, KS 67226	When was the debt incurred?	08/14/2014	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is:	: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured of	claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separa report as priority claims	ation agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts	
	Yes	■ Other. Specify Medical		
4.2	At&t Nonpriority Creditor's Name	Last 4 digits of account number		\$1,968.00
	PO Box 536216 Atlanta, GA 30353	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is:	: Check all that apply	
	Debtor 1 only	Пол		
	Debtor 2 only	☐ Contingent☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured of	claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separa report as priority claims	ation agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts	
	Yes	Other. Specify		
4.3	Bank of America	Last 4 digits of account number	9039	\$14,119.96
	Nonpriority Creditor's Name PO Box 982235 EI Paso, TX 79998	When was the debt incurred?	07/1/2014	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is:	: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured of	claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separa report as priority claims	ation agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts	
	☐ Yes	Other, Specify		

	William Eric Summers Shawnna Renee Summers		Case number (if know)	
4.4	Best Buy/CBNA	Last 4 digits of account number	0626	\$1,305.24
	Nonpriority Creditor's Name PO Box 6497 Sioux Falls, SD 57117	When was the debt incurred?	07/28/2013	
_	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent		
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed		
	☐ At least one of the debtors and another☐ Check if this claim is for a community debt		d claim: ration agreement or divorce that you did not	
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
	Chase Bank Nonpriority Creditor's Name	Last 4 digits of account number	4964	\$3,631.51
	PO Box 15298 Wilmington, DE 19850	When was the debt incurred?	12/1/2007	
_	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify		
	Chase Bank Nonpriority Creditor's Name	Last 4 digits of account number	3976	\$16,146.49
	PO Box 15298 Wilmington, DE 19850	When was the debt incurred?	02/23/2012	
_	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin		
	Yes	Other. Specify		

	r 1 William Eric Summers r 2 Shawnna Renee Summers		Case number (if know)	
4.7	Children's Dentistry of Wichita	Last 4 digits of account number	4397	\$1,671.00
	Nonpriority Creditor's Name 2143 N Collective Lane Suite B	When was the debt incurred?	03/25/2015	
	Wichita, KS 67206 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ At least one of the debtors and another☐ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharing	ration agreement or divorce that you did not	
	Yes	·	g plans, and other similal debits	
4.8	Citicards CBNA Nonpriority Creditor's Name	Last 4 digits of account number	4299	\$7,381.52
	701 E 60th S N Sioux Falls, SD 57104	When was the debt incurred?	12/17/2001	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify	g plans, and other similar debts	
4.9	Clinical Partners PA - Hillcrest Nonpriority Creditor's Name	Last 4 digits of account number		\$960.00
	1120 S Utica Ave Tulsa, OK 74104	When was the debt incurred?	01/17/2014	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Type of NONPRIORITY unsecured ☐ Student loans	o ciaim:	
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin		
	☐ Yes	Other. Specify		

2 Shawnna Renee Summers	Case number (if know)	
Credit Collection Inc	Last 4 digits of account number	\$0.0
Nonpriority Creditor's Name 2915 N. Classen Blvd	When was the debt incurred?	
Oklahoma City, OK 73106 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Collecting for Tulsa OB-GYN	
Creighton Collier		\$0.0
Nonpriority Creditor's Name	Last 4 digits of account number	φυ.(
3127 S. Quaker Rd Tulsa, OK 74114	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Attorney for Robert L. Hill, Jr.	
Daniel R. Ede	Last 4 digits of account number	\$2,055.5
Nonpriority Creditor's Name PO Box 702334	When was the debt incurred? 07/1/2013	
Tulsa, OK 74170 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Divorce Attorney	

Shawnna Renee Summers	Case number (if know)	
Diagnostic Imaging	Last 4 digits of account number	\$195.00
Nonpriority Creditor's Name 4500 S Garnett, Ste 919	When was the debt incurred?	
Tulsa, OK 74146	As of the later of the three letters to the state of the	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only		
Debtor 2 only	Contingent	
•	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
\square Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Dopps Wellness	Last 4 digits of account number 2522	\$310.34
Nonpriority Creditor's Name B114 W Central Wichita, KS 67212	When was the debt incurred? 12/23/2014	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only		
☐ Debtor 2 only	Contingent	
<u>_</u>	Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify	
Emergency Management Assoc PC		\$745.00
Nonpriority Creditor's Name	Last 4 digits of account number	φ/45.00
10501 E 91St St Tulsa, OK 74133	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify	

Shawnna Renee Summers	Case number (if know)	
ERC	Last 4 digits of account number	\$0.0
Nonpriority Creditor's Name	Last 4 digits of account number	Ψ0.0
PO Box 57547	When was the debt incurred?	
Jacksonville, FL 32241		
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Collecting for AT&T	
Figure 1 Community of Association		* 0.0
Financial Corporation of America Nonpriority Creditor's Name	Last 4 digits of account number	\$0.0
PO Box 203500 Austin, TX 78720	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Student loans	
Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Collecting for Hillcrest Medical Center	
First Premier	Last 4 digits of account number 5696	\$314.6
Nonpriority Creditor's Name	When we the debt in some 10 00/45/2000	
3820 N Louise Ave Sioux Falls, SD 57107	When was the debt incurred? 02/15/2009	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Student loans	
Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
• • • • • • • • • • • • • • • • • • •	<u> </u>	
No	Debts to pension or profit-sharing plans, and other similar debts	

First Premier	Last 4 digits of account number	1121	\$425.34
Nonpriority Creditor's Name 3820 N Louise Ave	When was the debt incurred?	09/18/2009	
Sioux Falls, SD 57107			
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed	Lalaina	
At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	i ciaim:	
☐ Check if this claim is for a community debt	<u> </u>		
Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify		
FNB Omaha	Last 4 digits of account number	4332	\$3,038.50
Nonpriority Creditor's Name PO Box 3412	When was the debt incurred?	05/1/2015	<u> </u>
Omaha, NE 68197	_		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only			
Debtor 2 only	Contingent		
<u> </u>	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	l claim:	
At least one of the debtors and another	Student loans	i Claiii.	
☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	ration agreement of divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify		
Heritage Veterinary Hospital	Last 4 digits of account number		\$577.00
Nonpriority Creditor's Name			·
4011 S 79th E Ave	When was the debt incurred?		
Tulsa, OK 74145 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that annly	
Who incurred the debt? Check one.	. So or the dute you me, the claim i	C. Oncok all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	•	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify		

Hillcrest Medical Center	Last 4 digits of account number	\$3,208.05
Nonpriority Creditor's Name 1120 S Utica Ave Tulsa, OK 74104	When was the debt incurred? 01/17/2014	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Immediate Medical Care	Last 4 digits of account number 2951	\$42.74
Nonpriority Creditor's Name 4722 W Kellogg	When was the debt incurred? 08/16/2014	<u> </u>
Wichita, KS 67209 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	The of the date year me, the stant is. Oneon an anatappy	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	□ Unliquidated	
■ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Jacob's learning ladder	Last 4 digits of account number	\$6,710.00
Nonpriority Creditor's Name 5002 E Douglas Ave Wichita, KS 67208	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
■ No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
— IVO	_ Daycare expenses that was supposed to be	
☐ Yes	Other. Specify paid by Shawnna's ex-husband	

Shawnna Renee Summers	Case number (_{if know})	
Navient Solutions	Last 4 digits of account number	\$37,110.3
Nonpriority Creditor's Name		
PO Box 9655 Wilkes Barre, PA 18773	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Student Loan	
Nelnet	Last 4 digits of account number	\$71,553.02
Nonpriority Creditor's Name PO Box 82561	When was the debt incurred?	·
Lincoln, NE 68501		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Student Loan	
Patsy Barker	Last 4 digits of account number 1000	\$54.23
Nonpriority Creditor's Name		· · · · · · · · · · · · · · · · · · ·
315 N Hillside St #B	When was the debt incurred? 08/12/2015	
Wichita, KS 67214 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Medical	

2 Shawnna Renee Summers	Case number (if know)	
Preventive Family Dentistry	Last 4 digits of account number	\$99.00
Nonpriority Creditor's Name 6539 E 31st St #28	When was the debt incurred?	
Tulsa, OK 74145 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
\square Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Radiology Consultants	Last 4 digits of account number	\$350.00
Nonpriority Creditor's Name 4111 S Darlington PI #700 Tulsa, OK 74135	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Randy McCormick, DDS	Last 4 digits of account number	\$283.00
Nonpriority Creditor's Name		
1701 S. Peoria ave	When was the debt incurred?	
Tulsa, OK 74120 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim is. Offect all that apply	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ At least one of the debtors and another ☐ Check if this claim is for a community	Student loans	
LI CHECK IT THIS CIAIM IS FOR A COMMUNITY	☐ Obligations arising out of a separation agreement or divorce that you did not	
debt Is the claim subject to offset?		
debt	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	

1 William Eric Summers 2 Shawnna Renee Summers		Case number (if know)	
Regional Medical Laboratory	Last 4 digits of account number	4968	\$92.55
Nonpriority Creditor's Name 9330 E 41st St	When was the debt incurred?	12/28/2015	
Tulsa, OK 74145 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify		
Robert L Hill Jr	Last 4 digits of account number		\$4,698.00
Nonpriority Creditor's Name 7700 N Hudson Ave., Ste 10	When was the debt incurred?	08/21/2015	* ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Oklahoma City, OK 73116 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify		
Saint Francis Hospital	Last 4 digits of account number		\$342.00
Nonpriority Creditor's Name 6161 S Yale Ave	When was the debt incurred?		
Tulsa, OK 74136 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed	d alaim.	
At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	a ciaim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
— INO	- 200.0 to periotori or profit diffalli	J F , and Julio Julius doblo	

Shawnna Renee Summers	Case number (if know)	
Saint Francis Hospital South	Last 4 digits of account number	\$1,925.00
Nonpriority Creditor's Name 10501 E 91st St	When was the debt incurred?	
Tulsa, OK 74133		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	-	
☐ Debtor 1 only ☐ Debtor 2 only	Contingent	
_	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Saint John Medical Center	Last 4 digits of account number	\$535.00
Nonpriority Creditor's Name 1923 S Utica	When was the debt incurred?	
Tulsa, OK 74104 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only		
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Student loans	
☐ Check if this claim is for a community	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify	
Shadow Mountain Behavorial	Last 4 digits of account number	\$526.00
Nonpriority Creditor's Name		*******
6262 S Sheridan Rd	When was the debt incurred?	
Tulsa, OK 74133 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	To of the date you me, the ordinate. Officer all that apply	
□ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only		
<u>_</u>	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community	☐ Obligations arising out of a separation agreement or divorce that you did not	
	report as priority claims	
s the claim subject to offset?		
s the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	

Shawnna Renee Summers		Case number (if know)	
St John Emergency Physicians	Last 4 digits of account number	0822	\$298.9
Nonpriority Creditor's Name PO Box 21228 Dept 334	When was the debt incurred?	02/9/2015	
Tulsa, OK 74121 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify		
St. John Clinic	Last 4 digits of account number		\$207.6
Nonpriority Creditor's Name			*
attn #13292x	When was the debt incurred?		
PO Box 14000 Belfast, ME 04915			
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify		
Synchrony Bank	Last 4 digits of account number		\$3,793.2
Nonpriority Creditor's Name PO Box 105972	When was the debt incurred?		40,100.
Atlanta, GA 30348			
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
Debtor 1 only			
Debtor 2 only	Contingent		
■ Debtor 1 and Debtor 2 only	☐ Unliquidated		
_	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	Student loans	u 01411111	
☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
is the cialli subject to phaet:	. sport as promy diamino		
No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	

The Dermatology Clinic	Last 4 digits of account number	9700	\$33.6
Nonpriority Creditor's Name 835 N Hillside Wichita, KS 67214	When was the debt incurred?	08/6/2015	
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes			
The Orthopaedic Center			\$228.00
Nonpriority Creditor's Name 1809 E 13th St	Last 4 digits of account number When was the debt incurred?		ΨΖΖΟ.00
Tulsa, OK 74104			
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify		
Tulsa Adjustment Bureau	Last 4 digits of account number		\$0.00
Nonpriority Creditor's Name			*****
1754 Utica Square #28 Tulsa, OK 74114	When was the debt incurred?		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	

Shawnna Renee Summers	Case number (if know)	
Tulsa OB Gyn Associates	Last 4 digits of account number	\$143.00
Nonpriority Creditor's Name 2000 S Wheeling Ave #800	When was the debt incurred?	
Tulsa, OK 74104 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	The of the date yearing, the statistics officer all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	
Tulsa Radiology Associates	Last 4 digits of account number	\$81.00
Nonpriority Creditor's Name 4111 S Darlington PI #700 Tulsa, OK 74135	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	
Tulsa Women's Healthcare	Last 4 digits of account number	\$155.00
Nonpriority Creditor's Name		•
10011 S Yale Ave #100	When was the debt incurred?	
Tulsa, OK 74137 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	□ Continues	
Debtor 2 only	☐ Contingent	
Debtor 1 and Debtor 2 only	☐ Unliquidated	
_	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
la tha alaim auhiast ta cff+0		
s the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	

Debtor 1 William Eric Summers Debtor 2 Shawnna Renee Summers		Case number (if know)	
4.4 6	USAA Savings Bank	Last 4 digits of account number 4102	\$83.22
	Nonpriority Creditor's Name 10750 McDermott Freeway San Antonio, TX 78288	When was the debt incurred?	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.4	Utica Park Clinic	Last 4 digits of account number	\$969.00
7	Nonpriority Creditor's Name		Ψοσο.σο
	1145 S Utica Tulsa, OK 74104	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.4 8	Warren Clinic	Last 4 digits of account number	\$329.00
	Nonpriority Creditor's Name 6161 S Yale Ave Tulsa, OK 74136	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	117	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
		— Оптет. Эреопу	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 William Eric Summers Debtor 2 Shawnna Renee Summers	Case number (if know)
Name and Address Account Management Resources	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.45 of (Check one):
PO Box 60607	Part 2: Creditors with Nonpriority Unsecured Claims
Oklahoma City, OK 73146	Last 4 digits of account number 0572
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
Account Management Resources	Line 4.43 of (Check one):
PO Box 60607 Oklahoma City, OK 73146	■ Part 2: Creditors with Nonpriority Unsecured Claims
Oktanoma Sity, Six 75145	Last 4 digits of account number 3872
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
Capital Accounts	Line 4.28 of (Check one):
PO Box 140065 Nashville, TN 37214	■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number 4019
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
Central States Recovery PO Box 3130	Line 4.23 of (Check one):
Hutchinson, KS 67504	■ Part 2: Creditors with Nonpriority Unsecured Claims
, , , , , , , , , , , , , , , , , , , ,	Last 4 digits of account number 1609
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
Credit Bureau Services Assoc	Line 4.36 of (Check one):
123 W 7th Ave. Ste 300 Stillwater, OK 74074	■ Part 2: Creditors with Nonpriority Unsecured Claims
Stillitator, Six 14014	Last 4 digits of account number 8472
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
Equinox Collection Service 10159 E. 11th Street, Ste 500	Line 4.30 of (Check one):
Tulsa, OK 74128	■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
First National Collection Bureau PO Box 51660	Line 4.18 of (Check one):
Sparks, NV 89435	■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number 6228
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
Firstpoint Collection Resources PO Box 26140	Line 4.9 of (Check one):
Greensboro, NC 27402	■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number 8444
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
Jefferson Capital Systems 16 McLeland Rd	Line 4.19 of (Check one):
St. Cloud, MN 56303	■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number 3951
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
Kansas Counselors Ince 1421 N Saint Paul St	Line 4.14 of (Check one):
Wichita, KS 67203	■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number 3282
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
Mars Inc 4530 S Sheridan Rd Ste 106	Line 4.41 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Tulsa, OK 74105	■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number 4090
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?

Official Form 106 E/F

Debtor 1 William Eric Summers Debtor 2 Shawnna Renee Summers		Case number (if know)
Mars Inc	Line 4.12 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
4530 S Sheridan Rd Ste 106	Line or (oncor one).	Part 2: Creditors with Nonpriority Unsecured Claims
Tulsa, OK 74105	Last 4 digits of account number	9615
	Edot 1 digito of docodin Hambor	5013
Name and Address Medical Revenue Service	On which entry in Part 1 or Part 2 did y Line 4.22 of (Check one):	-
PO Box 1940	Line 4.22 of (Check one).	□ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims
Melbourne, FL 32902		
	Last 4 digits of account number	0212
Name and Address	On which entry in Part 1 or Part 2 did y	· <u> </u>
Tulsa Adjustment Bureau 1754 Utica Square	Line 4.29 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims
Tulsa, OK 74114		Part 2: Creditors with Nonpriority Unsecured Claims
•	Last 4 digits of account number	0722
Name and Address	On which entry in Part 1 or Part 2 did y	you list the original creditor?
Tulsa Adjustment Bureau	Line <u>4.13</u> of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
1754 Utica Square Tulsa, OK 74114		■ Part 2: Creditors with Nonpriority Unsecured Claims
Tuisa, OK 74114	Last 4 digits of account number	2710
Name and Address	On which entry in Part 1 or Part 2 did y	vou list the original creditor?
Tulsa Adjustment Bureau	Line 4.44 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
1754 Utica Square		Part 2: Creditors with Nonpriority Unsecured Claims
Tulsa, OK 74114	Last 4 digits of account number	0704
Name and Address	On which entry in Part 1 or Part 2 did y	you list the original graditor?
Tulsa Adjustment Bureau	Line 4.21 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
1754 Utica Square		Part 2: Creditors with Nonpriority Unsecured Claims
Tulsa, OK 74114	Last 4 digits of account number	0003
Name and Address United Recovery Systems	On which entry in Part 1 or Part 2 did y Line 4.46 of (Check one):	you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 72299	<u> </u>	Part 2: Creditors with Nonpriority Unsecured Claims
Houston, TX 77272	Last 4 digits of account number	. ,
	Last 4 digits of account number	7501
Name and Address	On which entry in Part 1 or Part 2 did y	
Works and Lentz 1437 S Boulder Ave	Line 4.31 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Ste 900		Part 2: Creditors with Nonpriority Unsecured Claims
Tulsa, OK 74119	Last 4 digits of account number	8652
Name and Address Works and Lentz	On which entry in Part 1 or Part 2 did y Line 4.34 of (<i>Check one</i>):	you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims
1437 S Boulder Ave	Line 4104 Of Check one).	Part 2: Creditors with Nonpriority Unsecured Claims
Ste 900		— Part 2. Creditors with Nonphority onsecured Glaims
Tulsa, OK 74119	Last 4 digits of account number	2346
	0 111 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Name and Address Works and Lentz	On which entry in Part 1 or Part 2 did y Line 4.47 of (<i>Check one</i>):	you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims
1437 S Boulder Ave	<u> </u>	Part 2: Creditors with Nonpriority Unsecured Claims
Ste 900		. a.v. 2. Groundro mar Horiphority Oriocourou Olaimo
Tulsa, OK 74119	Last 4 digits of account number	8800
Name and Address Works and Lentz	On which entry in Part 1 or Part 2 did y Line 4.35 of (<i>Check one</i>):	you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims
1437 S Boulder Ave		Part 2: Creditors with Nonpriority Unsecured Claims
Ste 900		· 1 · · A · · · · · · · · · · · · · · ·

Debtor 1 William Eric Summers Debtor 2 Shawnna Renee Summers		Case number (if know)
Tulsa, OK 74119		
·	Last 4 digits of account number	8107
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?
Works and Lentz	Line 4.33 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
1437 S Boulder Ave Ste 900 Tulsa, OK 74119		Part 2: Creditors with Nonpriority Unsecured Claims
Tuisu, 51(1411)	Last 4 digits of account number	2916
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?
Works and Lentz	Line 4.15 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
1437 S Boulder Ave Ste 900 Tulsa, OK 74119		Part 2: Creditors with Nonpriority Unsecured Claims
Tuisa, OK 14113	Last 4 digits of account number	2375
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?
Works and Lentz	Line 4.48 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
1437 S Boulder Ave Ste 900		■ Part 2: Creditors with Nonpriority Unsecured Claims
Tulsa, OK 74119	Last 4 digits of account number	4304

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
6a.	Domestic support obligations	6a.	\$	0.00
6b.	Taxes and certain other debts you owe the government	6b.	\$	75,844.96
6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	75,844.96
				Total Claim
6f.	Student loans	6f.	\$	0.00
6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	188,848.05
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	188,848.05
	6b. 6c. 6d. 6e. 6f. 6g. 6h.	 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 	6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 6e. Total Priority. Add lines 6a through 6d. 6e. 6f. Student loans 6f. 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6h. 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$ 6e. Total Priority. Add lines 6a through 6d. 6e. \$ 6f. Student loans 6f. \$ 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 8

Fill in this infor	mation to identify your	case:		
Debtor 1	William Eric Sum	mers		
	First Name	Middle Name	Last Name	
Debtor 2	Shawnna Renee	Summers		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OKLAHOMA	
Case number (if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Estancia Apartments
7705 S Mingo Rd
Tulsa, OK 74133

State what the contract or lease is for
Rental lease

Fill in this info	ormation to identify your	case:			
Debtor 1	William Eric Sum	mers			
5 1 6	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Shawnna Renee First Name	Summers Middle Name	Last Name		
	Bankruptcy Court for the:	NORTHERN DISTRICT			
Office Otates	bunkruptoy Court for the.	- NORTHER ROTTER	OT OTC. TOWN		
Case number (if known)					☐ Check if this is an amended filing
	orm 106H le H: Your Cod	ebtors			12/15
people are fili fill it out, and i your name and	ng together, both are equ	ally responsible for sup boxes on the left. Attacl Answer every question	plying correct informa h the Additional Page i.	tion. If more space is a to this page. On the to	rate as possible. If two married needed, copy the Additional Page, op of any Additional Pages, write
_	,	,			
■ No □ Yes					
	the last 8 years, have you California, Idaho, Louisiana				ty states and territories include)
■ No. Go □ Yes. Di	to line 3. id your spouse, former spo	use, or legal equivalent liv	e with you at the time?		
in line 2 a	again as a codebtor only i D), Schedule E/F (Officia	if that person is a guaran	ntor or cosigner. Make	sure you have listed t	ng with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fil
	umn 1: Your codebtor e, Number, Street, City, State and Z	IP Code		Column 2: The cr Check all schedul	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lir	ne
Nam	ne			☐ Schedule E/F,	line
				☐ Schedule G, lir	ne
Num	ber Street			<u> </u>	
City		State	ZIP Code		
3.2				☐ Schedule D, lir	200
Nam	ne			☐ Schedule E/F,	·
				☐ Schedule G, lir	
Num	ber Street			_	
City		State	ZIP Code		

						_			
	in this information to identify your btor 1 William Fr	case: ic Summers							
		Renee Summers			_				
(Spo	ouse, if filing)								
Un	ited States Bankruptcy Court for t	ne: NORTHERN DISTRI	CT OF OKLAHOMA						
Ca	se number					Check if this is	:		
(If k	nown)		_			☐ An amend	ed filing		
								ring postpetition chapte following date:	r
0	fficial Form 106l					MM / DD/	YYYY		
S	chedule I: Your Inc	come						12	/15
spo atta	plying correct information. If you are separated and you have a separate sheet to this form the separate because the separate sheet to this form the separate sheet sh	our spouse is not filing was not the top of any addit	ith you, do not inclu	de infori	mati	on about your sp	ouse. If r	more space is needed	
1.	Fill in your employment		Dalston			Dalitan	0	(Wanasana)	
	information.		Debtor 1			_		-filing spouse	
	If you have more than one job, attach a separate page with	Employment status	☐ Employed			■ Emp	loyed		
	information about additional		■ Not employed			☐ Not employed			
	employers.	Occupation				Server			
	Include part-time, seasonal, or self-employed work.	Employer's name				Mahog	any, L.l	C.	
	Occupation may include studen or homemaker, if it applies.	t Employer's address					Yale Av OK 741		
		How long employed	there?				0 Years	, 4 Months	
Pa	rt 2: Give Details About M	onthly Income							
	imate monthly income as of the use unless you are separated.	date you file this form. If	you have nothing to r	eport for	any	line, write \$0 in the	e space. I	nclude your non-filing	
	ou or your non-filing spouse have to e space, attach a separate sheet		ombine the informatio	n for all e	empl	oyers for that pers	on on the	lines below. If you nee	∍d
						For Debtor 1		Debtor 2 or Filing spouse	
2.	List monthly gross wages, sa deductions). If not paid monthly			2.	\$	0.00	\$	3,011.52	
3	Estimate and list monthly over	rtime nav		3	+\$	0.00	+ \$	0.00	

0.00

3,011.52

Calculate gross Income. Add line 2 + line 3.

Copy line 4 here 4. \$ 0.00 \$ 3,011.52 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans For Debtor 1 For Debtor 2 or non-filing spouse 5 0.00 \$ 3,011.52 5 0.00 \$ 239.05 5 0.00 \$ 0.00 5 0.00 5 0.00 5 0.00 5 0.00 5 0.00 5 0.00	
5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5d. \$ 0.00 \$ 0.00 \$ 0.00	
5a.Tax, Medicare, and Social Security deductions5a.\$0.00\$239.055b.Mandatory contributions for retirement plans5b.\$0.00\$0.005c.Voluntary contributions for retirement plans5c.\$0.00\$0.005d.Required repayments of retirement fund loans5d.\$0.00\$0.00	
5b.Mandatory contributions for retirement plans5b.\$0.00\$0.005c.Voluntary contributions for retirement plans5c.\$0.00\$0.005d.Required repayments of retirement fund loans5d.\$0.00\$0.00	
5c.Voluntary contributions for retirement plans5c.\$0.00\$0.005d.Required repayments of retirement fund loans5d.\$0.00\$0.00	
5d. Required repayments of retirement fund loans 5d. \$ 0.00 \$ 0.00	
· · · · · · · · · · · · · · · · · · ·	
5e. Insurance 5e. \$ 0.00 \$ 0.00	
5f. Domestic support obligations 5f. \$ 0.00 \$ 0.00	
5g. Union dues 5g. \$ 0.00 \$ 0.00	
5h. Other deductions. Specify: 5h.+ \$ + \$ 0.00	
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ \$ \$ 239.05	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ \$ \$ 2,772.47	
8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. \$ 0.00 \$ 0.00	
8b. Interest and dividends 8b. \$ 0.00 \$ 0.00	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ 0.00	
8d. Unemployment compensation 8d. \$	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ 0.00	
8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00	
8h. Other monthly income. Specify: 8h.+ \$ 0.00 + \$ 0.00	
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$\ \\$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	772.47
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$	0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$	772.47
Combined	
13. Do you expect an increase or decrease within the year after you file this form? No.	come
☐ Yes. Explain:	

Fill in th	is information to identify yo	our case:				
Debtor 1	William Eric			Check	c if this is:	
			_		An amended filing	
Debtor 2 (Spouse,	Jilawiiia ite	enee Summers				ving postpetition chapter the following date:
United St	tates Bankruptcy Court for the	e: NORTHERN DISTRICT OF	OKLAHOMA	1	MM / DD / YYYY	
Case nur						
(If known	h)					
Offic	cial Form 106J					
	edule J: Your					12/
informa		s possible. If two married peop eeded, attach another sheet to ery question.				
Part 1:	Describe Your House	ehold				
	this a joint case? No. Go to line 2.					
		in a separate household?				
_		in a separate nousenoid?				
	■ No □ Yes. Debtor 2 mus	ust file Official Form 106J-2, <i>Expe</i>	enses for Separate House	hold of Debto	or 2.	
2. Do	you have dependents?	□No				
	o not list Debtor 1 and ebtor 2.	■ Yes. Fill out this information each dependent	•		Dependent's age	Does dependent live with you?
Do	not state the		-			□ No
de	pendents names.		Step-son		4	■ Yes
			Step-daughter		6	□ No ■ Yes
						□ No
			Step-daughter		8	■ Yes
			Step-daughter		17	□ No ■ Yes
ex	your expenses include penses of people other t urself and your depende	than				
Part 2:	Estimate Your Ongoi	ing Monthly Expenses				
Estimat expens	te your expenses as of y	our bankruptcy filing date unl bankruptcy is filed. If this is a				
the valu		non-cash government assista nd have included it on <i>Schedu</i>			Your exp	enses
	ne rental or home owners yments and any rent for th	ship expenses for your resider ne ground or lot.	nce. Include first mortgage	4. \$		1,060.00
lf r	not included in line 4:					
4a.	. Real estate taxes			4a. \$		0.00
4b		's, or renter's insurance		4b. \$		28.00
4c.		epair, and upkeep expenses		4c. \$		0.00
4d.	 Homeowner's associa 	ation or condominium dues		4d. \$		0.00

5. \$

0.00

5. Additional mortgage payments for your residence, such as home equity loans

		Eric Summers a Renee Summers	Case num	ber (if known)	
				-	
6.	Utilities:				
		r, heat, natural gas	6a.	·	205.00
	•	ewer, garbage collection	6b.	·	75.00
	•	e, cell phone, Internet, satellite, and cable services	6c.	·	370.00
	6d. Other. Sp		6d.	·	0.00
7.		sekeeping supplies	7.	\$	600.00
8.		children's education costs	8.	\$	0.00
9.	<u> </u>	dry, and dry cleaning	9.	\$	0.00
10.	-	products and services	10.		0.00
11.		•	11.	\$	25.00
12.	Transportation Do not include of	Include gas, maintenance, bus or train fare.	12.	\$	200.00
13.		clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.		tributions and religious donations	14.	\$	0.00
15.	Insurance.			•	<u> </u>
		nsurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insura	ance	15a.	\$	0.00
	15b. Health ins	surance	15b.	\$	0.00
	15c. Vehicle in	nsurance	15c.	\$	75.00
	15d. Other insu	urance. Specify:	15d.	\$	0.00
16.	Taxes. Do not in	nclude taxes deducted from your pay or included in lines 4 or 20.			
	Specify:		16.	\$	0.00
17.		lease payments:			
		nents for Vehicle 1	17a.	·	0.00
		nents for Vehicle 2	17b.	·	0.00
		ecify: Storage Unit	17c.	·	95.00
	17d. Other. Sp	·	17d.	\$	0.00
18.		s of alimony, maintenance, and support that you did not report a your pay on line 5, Schedule I, Your Income (Official Form 106I)		\$	0.00
19		s you make to support others who do not live with you.	,	\$	0.00
10.	Specify:	S you make to support offices who do not live with you.	19.	Ψ	0.00
20.	· · ·	perty expenses not included in lines 4 or 5 of this form or on Scl		our Income.	
		s on other property	20a.		0.00
	20b. Real esta	te taxes	20b.	\$	0.00
	20c. Property,	homeowner's, or renter's insurance	20c.	\$	0.00
		nce, repair, and upkeep expenses	20d.	\$	0.00
		ner's association or condominium dues	20e.	\$	0.00
21.	Other: Specify:	Storage Unit	21.	+\$	95.00
22.	•	monthly expenses			
	22a. Add lines 4			\$	2,828.00
		22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. Add line 22	2a and 22b. The result is your monthly expenses.		\$	2,828.00
23.	Calculate your	monthly net income.			
	23a. Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	2,772.47
	23b. Copy you	r monthly expenses from line 22c above.	23b.	-\$	2,828.00
		your monthly expenses from your monthly income.	00-	c	-55.53
	The result	t is your monthly net income.	23c.	\$	-33.33
24	Do you expect	an increase or decrease in your expenses within the year after	vou filo this	form?	
24.		ou expect to finish paying for your car loan within the year or do you expect yo			se or decrease because of a
		e terms of your mortgage?			
	■ No.				
	☐ Yes.	Explain here:			

Fill in this inform	nation to identify your	case:		
Debtor 1	William Eric Sum	mers		
	First Name	Middle Name	Last Name	—
Debtor 2	Shawnna Renee	Summers		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF OKLAHOMA	
Case number _				
(if known)				☐ Check if this is an
				amended filing
Official Form	n 106Dec			
Declarati	ion About a	an Individual	Debtor's Schedule	2S 12/15
,	3 U.S.C. §§ 152, 1341, 1	l519, and 3571.		
Did you pay	y or agree to pay some	eone who is NOT an attor	ney to help you fill out bankruptcy fo	rms?
■ No				
☐ Yes. N	lame of person			ach Bankruptcy Petition Preparer's Notice, claration, and Signature (Official Form 119)
	ity of perjury, I declare true and correct.	that I have read the sum	mary and schedules filed with this do	eclaration and
X /s/ Willi	iam Eric Summers		X /s/ Shawnna Renee Su	ımmers
	Eric Summers		Shawnna Renee Sumi	
	e of Debtor 1		Signature of Debtor 2	
Date .I	luly 12 2016		Date July 12 2016	

Debtor 1	William Eric Sum	mers		
	First Name	Middle Name	Last Name	
Debtor 2	Shawnna Renee			
(Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States E	Bankruptcy Court for the:	NORTHERN DISTRICT OF OK	LAHOMA	
Case number (if known)				☐ Check if this is an amended filing
se as complete	nt of Financial A	ole. If two married people are fili attach a separate sheet to this fo	Is Filing for Bankruptcy ng together, both are equally responsi orm. On the top of any additional page	
<u> </u>	, , , , , ,	ital Status and Where You Lived	d Before	
. What is yo	our current marital status	s?		
■ Marrie	ed narried			
. During the	e last 3 years, have you li	ived anywhere other than where	you live now?	
□ No	ist all of the places you liv			
Yes. I	List all of the places you liv	ved in the last 3 years. Do not inclu	ude where you live now.	
	Prior Address:	ved in the last 3 years. Do not included in the last 3 years. Do not include in the last 3 years. Do not 3 years.	Debtor 2 Prior Address:	Dates Debtor 2 lived there
Debtor 1 1416 N V	, ,	Dates Debtor 1	•	
1416 N V Broken 2	Prior Address: Villow Ave Arrow, OK 74012	Dates Debtor 1 lived there From-To:	Debtor 2 Prior Address:	lived there Same as Debtor 1
Debtor 1 1416 N V Broken A 5102 E 2 Wichita,	Prior Address: Willow Ave Arrow, OK 74012 Prior Address: Willow Ave Arrow, OK 74012	Dates Debtor 1 lived there From-To: 10/2015 - 2/2016 From-To:	Debtor 2 Prior Address: ■ Same as Debtor 1	lived there ■ Same as Debtor 1 From-To: ■ Same as Debtor 1

Official Form 107

Debtor 2		awnna Ren		ers	Cas	e number (if known)	
Part 2	Ехр	lain the Sou	rces of You	r Income			
Fill in	the t	otal amount o	f income yo	nployment or from operating u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
	No						
	Yes.	Fill in the deta	ails.				
				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		1 of current iled for bank		☐ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$8,200.74
				☐ Operating a business		☐ Operating a business	
For last calendar year: (January 1 to December 31, 2015)		1, 2015)	■ Wages, commissions, bonuses, tips	\$78,446.00	■ Wages, commissions, bonuses, tips	\$3,204.00	
				☐ Operating a business		☐ Operating a business	
		dar year befo December 31		■ Wages, commissions, bonuses, tips	\$181,207.00	■ Wages, commissions, bonuses, tips	\$12,943.00
				☐ Operating a business		☐ Operating a business	
_	No	source and the	-	me from each source separa	tely. Do not include income t	hat you listed in line 4.	
				Debtor 1		Debtor 2	
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
		1 of current iled for bank		Unemployment	\$3,318.00		
				Food Stamps	\$1,422.00		
		dar year: December 31	I, 2015)	Unemployment	\$7,110.00		
	_						
Part 3:	List	Certain Payı	ments You	Made Before You Filed for	Bankruptcy		
	either No.	Neither Deb	tor 1 nor D	s debts primarily consume ebtor 2 has primarily consu personal, family, or househo	u <mark>mer debts.</mark> Consumer debt	s are defined in 11 U.S.C. § 10	01(8) as "incurred by ar
			0 days befo Go to line 7	re you filed for bankruptcy, di	id you pay any creditor a tota	I of \$6,425* or more?	
		□ Yes	List below e	ach creditor to whom you pa	nts for domestic support oblig	n one or more payments and ations, such as child support	
			moidae	•	inis bankrupicy case.		

Del			enee Summers		Cas	e number (if known)		
		* Subject	to adjustment on 4/01/	19 and every 3 years after t	that for cases filed on	or after the date o	f adjustment.	
	■ Yes.			ve primarily consumer de		Lof \$600 or more?)	
		· ·	,	, a . a a	ay any croance a total			
		■ No. □ Yes	Go to line 7.		ol of #0000 on more one			naditan Danat
		□ Yes		tor to whom you paid a tota domestic support obligatio ruptcy case.				
	Creditor	's Name an	d Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
•	Insiders in of which y	nclude your i	relatives; any general pa fficer, director, person in	tcy, did you make a paym artners; relatives of any ge n control, or owner of 20% of 11 U.S.C. § 101. Include pa	neral partners; partne or more of their voting	rships of which yo securities; and ar	u are a genera ny managing a	I partner; corporations gent, including one for
	□ No							
			nents to an insider.					
	Insider's	Name and	Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
	_	her Willow Av Arrow, Ol		4/27/2016, 5/05/2016	\$3,650.00	\$2,000.00	had borrov	k money that I wed. Payed ck with my tax
		List all payr	nents to an insider Address	Dates of payment	Total amount	Amount you		this payment
					paid	still owe	Include cred	tor's name
aı	t 4: Ide	ntify Legal	Actions, Repossessio	ns, and Foreclosures				
•	List all suc modification	ch matters, i ons, and cor	ncluding personal injury ntract disputes.	tcy, were you a party in a				
	Case title	Fill in the de	etails.	Nature of the case	Court or agency		Status of the	a casa
	Case nu	mber		Nature of the case	Court or agency		Status of the	c case
	Robert	T. Hill, Jr						
	VC	•		Lawsuit	Tulsa County D		☐ Pending	-1
	vs Shawnr CS-201	na Conner 5-03989		Lawsuit	Tulsa County D 500 S Denver A Tulsa, OK 7410	ve	☐ Pending ☐ On appe ☐ Conclude	
0.	Shawnr CS-2019 Within 1 y	5-03989 year before		tcy, was any of your prop	500 S Denver A Tulsa, OK 7410	ve 3	☐ On appe ☐ Conclude	ed
0.	Within 1 y Check all	year before that apply a	you filed for bankrup nd fill in the details belo	tcy, was any of your prop	500 S Denver A Tulsa, OK 7410	ve 3	☐ On appe ☐ Conclude	ed
0.	Within 1 y Check all	year before that apply a Go to line 11 Fill in the in	you filed for bankrup nd fill in the details belo formation below.	tcy, was any of your prop w.	500 S Denver A Tulsa, OK 7410 perty repossessed, fo	ve 3 oreclosed, garnis	☐ On appe ☐ Conclude	ed , seized, or levied?
0.	Within 1 y Check all	year before that apply a	you filed for bankrup nd fill in the details belo formation below.	tcy, was any of your prop	500 S Denver A Tulsa, OK 7410 perty repossessed, fo	ve 3	☐ On appe ☐ Conclude	ed

Del	btor 2 Shawnna Renee Summers	Case number	(if known)	
11.	accounts or refuse to make a payment beca	cy, did any creditor, including a bank or financial in use you owed a debt?	stitution, set off any	amounts from your
	Yes. Fill in the details.			
	Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
12.	court-appointed receiver, a custodian, or an	y, was any of your property in the possession of an other official?	assignee for the ben	efit of creditors, a
Par	Yes It S: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankrupte ■ No □ Yes. Fill in the details for each gift.	cy, did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankrupte ☐ No ☐ Yes. Fill in the details for each gift or contr	cy, did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?
	Ţ.		Detection	Value
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
	James Mission 1204 N Joshua Broken Arrow, OK 74012	2000 BMW 528I with 190,000 miles	08/1/2014	\$4,400.00
Par	rt 6: List Certain Losses			
Ган	List Certain Losses			
15.	Within 1 year before you filed for bankruptcy or gambling?	or since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,
	■ No □ Yes. Fill in the details.			
		scribe any insurance coverage for the loss	Date of your	Value of property
	how the loss occurred Inc	lude the amount that insurance has paid. List pending urance claims on line 33 of Schedule A/B: Property.	loss	lost
Par	rt 7: List Certain Payments or Transfers			
16.	Within 1 year before you filed for bankruptc consulted about seeking bankruptcy or pre	y, did you or anyone else acting on your behalf pay paring a bankruptcy petition? arers, or credit counseling agencies for services require		erty to anyone you
	□ No			
	Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Person Who Made the Payment, if Not You			

Debtor 1 William Eric Summers Debtor 2 **Shawnna Renee Summers** Case number (if known) Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You Paul R. Tom, Attorney at Law 5/3/2016 **Attorney Fees** \$1,100.00 2727 E. 21st Street, Ste 604 Tulsa, OK 74114 paultom@tax-amnesty.com June 3, 2016 Access Counseling, Inc. \$14.95 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No П Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of transferred or transfer was **Address** payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. **Person Who Received Transfer** Date transfer was Description and value of Describe any property or payments received or debts **Address** property transferred made paid in exchange Person's relationship to you 2014 Ram 1500 Paid off car loan to 03/21/2016 **Hudiburg Auto Group** 6000 Tinker Diagonal Chrysler Capital. Used Midwest City, OK 73110 remainder for living expenses.|Value: 32400 None, sold my truck Christopher and Elizabeth Lewis Sold my home at 5102 E 2nd Paid mortgage balance 10/16/2015 5102 E 2nd St N St N. Wichita, KS 67208 to Chase Bank of Wichita, KS 67220 \$287,530. Paid sellers closing cost of \$6,700 None, sold my home and taxes/fees of \$3,633. Used remaining funds to catch up on bills and cover living expenses.|Value: 335000 Christopher and Elizabeth Lewis Sold Samsung flat screen TV Used fund to catch up 10/16/2015 5102 E 2nd St N with the house as a separate on bills.|Value: 1900 Wichita, KS 67220 transaction. None, sold a television with the house

	otor 2 William Eric Summers Shawnna Renee Summers				Case nur	nber (if known)	
19.	Within 10 years before you filed for bank beneficiary? (These are often called asset ■ No □ Yes. Fill in the details.			any property to a	ı self-settle	ed trust or similar devic	e of which you are a
	Name of trust	1	Description and	d value of the pro	perty tran	sferred	Date Transfer was
Par	t 8: List of Certain Financial Accounts.	Instrumo	ents Safa Dana	sit Boyes and S	torago Uni	ite	made
20.	Within 1 year before you filed for bankru sold, moved, or transferred? Include checking, savings, money marke houses, pension funds, cooperatives, as	ptcy, were	e any financial a	accounts or inst	ruments he	eld in your name, or for	
	Yes. Fill in the details.						
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)		ast 4 digits of Type of account count number instrument		unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Citizens Bank of Kansas 4820 E Douglas Ave Wichita, KS 67208	XXXX	(-9198	Checking ☐ Savings ☐ Money Market ☐ Brokerage ☐ Other		05/9/2016	\$0.00
	Bank of America 2959 N Rock Rd Wichita, KS 67226	хххх	c-5076	■ Checking □ Savings □ Money Ma □ Brokerage □ Other		08/26/2015	\$0.00
	Do you now have, or did you have within cash, or other valuables? No Yes. Fill in the details.	1 year be	efore you filed f	or bankruptcy, a	ny safe de	posit box or other depo	ository for securities,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code	e) .	Who else had a Address (Number State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage ur No Yes. Fill in the details.	nit or plac	e other than yo	ur home within 1	year befo	ore you filed for bankrup	otcy?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code	e) 1	Who else has o to it? Address (Number State and ZIP Code)	r, Street, City,	Describe	the contents	Do you still have it?
	Household Storage 12050 E 71st St Broken Arrow, OK 74012				goods a	aneous household and furnishings, kids toys, etc	□ No ■ Yes

	btor 1 btor 2	William Eric Summers Shawnna Renee Summers		Ca	ase number (if known)				
Pa	rt 9:	Identify Property You Hold or Control for S	Someone Else						
23.	•	ou hold or control any property that someo omeone.	ne else owns? Include any prop	erty y	ou borrowed from, are storing for	or hold in trust			
		No Yes. Fill in the details.							
		ner's Name ress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	escribe the property	Value			
Pa	rt 10:	Give Details About Environmental Informa	ation						
For	the pu	urpose of Part 10, the following definitions	apply:						
_	toxic regul	ronmental law means any federal, state, or substances, wastes, or material into the aillations controlling the cleanup of these sub	r, land, soil, surface water, grou estances, wastes, or material.	ndwa	ter, or other medium, including sta	atutes or			
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.								
		ordous material means anything an environ nrdous material, pollutant, contaminant, or s		us wa	ste, hazardous substance, toxic s	ubstance,			
Rep	ort all	notices, releases, and proceedings that yo	ou know about, regardless of wh	en th	ey occurred.				
24.	Has a	any governmental unit notified you that you	ı may be liable or potentially liab	le un	der or in violation of an environme	ntal law?			
		No Yes. Fill in the details.							
		ne of site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State & ZIP Code)	and	Environmental law, if you know it	Date of notice			
25.	Have	Have you notified any governmental unit of any release of hazardous material?							
		No Yes. Fill in the details.							
		ne of site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	and	Environmental law, if you know it	Date of notice			
26.	Have	you been a party in any judicial or adminis	strative proceeding under any en	viron	mental law? Include settlements a	nd orders.			
	_	No Yes. Fill in the details.							
		e Title e Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ature of the case	Status of the case			
Pa	rt 11:	Give Details About Your Business or Con	nections to Any Business						
27.	Withi	in 4 years before you filed for bankruptcy, c	did you own a business or have a	any o	f the following connections to any	business?			
		☐ A sole proprietor or self-employed in a t	rade, profession, or other activit	y, eitl	ner full-time or part-time				
		☐ A member of a limited liability company	(LLC) or limited liability partners	ship (LLP)				
		☐ A partner in a partnership							
		☐ An officer, director, or managing execut	ive of a corporation						
	☐ An owner of at least 5% of the voting or equity securities of a corporation								

Official Form 107

	otor 1 William Eric Summers Shawnna Renee Summers	c	ase number (if known)
	☐ No. None of the above applies. Go to I	Part 12.	
	Yes. Check all that apply above and fill	I in the details below for each business.	
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
	(Number, Otreet, Oity, State and 211 Gode)	Name of accountant or bookkeeper	Dates business existed
	Big E's Pit BBQ 7737 S Mingo Rd #924	Home based catering	EIN: 45-5254120 From-To 1/5/2012 - 2/15/2015
	Tulsa, OK 74133		From-To 1/5/2012 - 2/15/2015
	■ No □ Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Par	rt 12: Sign Below		
are with		false statement, concealing property, or	
Wi	Iliam Eric Summers	Shawnna Renee Summers	<u></u>
Sig	nature of Debtor 1	Signature of Debtor 2	
Dat	te _July 12, 2016	DateJuly 12, 2016	
Did ■ N		ent of Financial Affairs for Individuals Fili	ng for Bankruptcy (Official Form 107)?
	you pay or agree to pay someone who is no No Yes. Name of Person Attach the <i>Bankru</i>		
	. Attach the Bankiu	ipicy i callotti toparci s Notice, Deciaration,	and orginatoro (Omolai i omi i 10).

Fill in this information to identify your case:							
Debtor 1	William Eric Sum						
	First Name	Middle Name	Last Name				
Debtor 2	Shawnna Renee	Summers					
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OKLAHOMA				
(if known)					Check if this is an amended filing		

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Debtor 1 Debtor 2	William Eric Summers Shawnna Renee Summers	Case number (if known)	
name:		Detain the property and radiom it	□ Yes
		Retain the property and redeem it.Retain the property and enter into a	□ res
Descri	ption of tv	Reaffirmation Agreement. Retain the property and [explain]:	
	ng debt:	☐ Retain the property and [explain].	
in the info	ormation below. Do not list real estate leases. U	s d in Schedule G: Executory Contracts and Unexpired Jnexpired leases are leases that are still in effect; the if the trustee does not assume it. 11 U.S.C. § 365(p)(2)	lease period has not yet ended.
Describe	your unexpired personal property leases		Will the lease be assumed?
Lessor's			□ No
Description Property:	on of leased		☐ Yes
1			_
Lessor's Description	name: on of leased		□ No
Property:			☐ Yes
Lessor's	name:		□ No
Description Property:	on of leased		□ Yes
Lessor's	name:		
	on of leased		□ No
Property:			□ Yes
Lessor's			□ No
Property:	on of leased		☐ Yes
Lessor's	name:		□ No
	on of leased		_
Property:			☐ Yes
Lessor's	name: on of leased		□ No
Property:			☐ Yes
Part 3:	Sign Below		
	nalty of perjury, I declare that I have indicated that is subject to an unexpired lease.	my intention about any property of my estate that sec	ures a debt and any personal
	William Eric Summers	χ /s/ Shawnna Renee Summers	
	liam Eric Summers	Shawnna Renee Summers	
Sigr	nature of Debtor 1	Signature of Debtor 2	
Date	July 12, 2016	Date July 12, 2016	

Official Form 108

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation
	\$245	filing fee
	\$75	administrative fee
	+ \$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_form

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Oklahoma

In 1	William Eric Summers re Shawnna Renee Summers		Case No.	
		Debtor(s)	Chapter	7
	DIGGLOGUDE OF COMPEN	CATION OF ATTOI		EDTOD (C)
	DISCLOSURE OF COMPEN	SATION OF ATTOR	KNEY FOR DE	LBIOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,100.00
	Prior to the filing of this statement I have received		\$	1,100.00
	Balance Due		\$	0.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed competent	nsation with any other person	unless they are mem	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensat copy of the agreement, together with a list of the name			
5.	In return for the above-disclosed fee, I have agreed to ren	der legal service for all aspect	s of the bankruptcy c	ase, including:
	a. Analysis of the debtor's financial situation, and renderib. Preparation and filing of any petition, schedules, staterc. Representation of the debtor at the meeting of creditord. [Other provisions as needed]	nent of affairs and plan which	may be required;	
6.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any disc any other adversary proceeding.			es, relief from stay actions or
		CERTIFICATION		
this	I certify that the foregoing is a complete statement of any bankruptcy proceeding.	agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
,	July 12, 2016	/s/ Paul R. Tom		
_	Date	Paul R. Tom #904		
		Signature of Attorne Paul R. Tom, Atto		
		2727 E. 21st Stre		
		Tulsa, OK 74114	040 740 0000	
		918-743-2000 Fa paultom@tax-am		
		Name of law firm		
		, , , , , , , , , , , , , , , , , , ,		

Revised 02/2012

United States Bankruptcy Court Northern District of Oklahoma

William Eric Summers In re Shawnna Renee Summers				Case No.		
		Debtor(s)		Chapter	7	
VERIFICA	TION AS T	O OFFICIA	L CREDITO	OR LIST		
	•	Origina	1			
		Amend	ment			
	□ A	dd □	Delete			
I hereby certify under penalty of pe List Submission application, or uploaded to best of my knowledge.			-			
I further acknowledge that (1) the a responsibility of the debtor and the debtor's that the various schedules and statements re	attorney, (2) the court wi	ll rely on the	creditor list	ing for all mail	ings, and (3)
If this filing is an amendment to t deleted at this time. (For verification pur) deleted.)					_	
# of Creditors (or if amende Method of submission:	d, # of credi	tors added)				
a)X uploaded to Electronic b) Creditor List Submission www.oknb.uscourts.g# of Creditors (on attached list)	n application gov, or avail	n (to be used lable in the Cl		rs, found or	n the Court's we	bsite at
/s/ William Eric Summers		/s/ Shawnna F	Renee Summe	rs		
Debtor Signature		Joint Debtor				_
Address:(if not represented by an attorney)		Address:(if n	-	d by an atto	rney)	
Phone:(if not represented by an attorney)		Phone:(if not	represented l	oy an attorn	ey)	-
/s/ Paul R. Tom		Date: July 12	. 2016			_
Attorney Signature		<u> </u>	<u>, </u>			
Paul R. Tom #9049		[Check if app				
Paul R. Tom, Attorney at Law		Creditors	with foreign	addresses i	ncluded	
2727 E. 21st Street, Ste 604 Tulsa, OK 74114-0000						
918-743-2000						
918-749-8803						
paultom@tax-amnesty.com						

Christopher Conner 8502 E 15th St Tulsa, OK 74112

Account Management Resources PO Box 60607 Oklahoma City, OK 73146

Account Management Resources PO Box 60607 Oklahoma City, OK 73146

AFC/Doctors Express 3161 N Rock Rd. Ste A Wichita, KS 67226

At&t PO Box 536216 Atlanta, GA 30353

Bank of America PO Box 982235 El Paso, TX 79998

Best Buy/CBNA PO Box 6497 Sioux Falls, SD 57117

Capital Accounts PO Box 140065 Nashville, TN 37214

Central States Recovery PO Box 3130 Hutchinson, KS 67504

Chase Bank PO Box 15298 Wilmington, DE 19850

Chase Bank PO Box 15298 Wilmington, DE 19850

Children's Dentistry of Wichita 2143 N Collective Lane Suite B Wichita, KS 67206

Citicards CBNA 701 E 60th S N Sioux Falls, SD 57104 Clinical Partners PA - Hillcrest 1120 S Utica Ave Tulsa, OK 74104

Credit Bureau Services Assoc 123 W 7th Ave. Ste 300 Stillwater, OK 74074

Credit Collection Inc 2915 N. Classen Blvd Oklahoma City, OK 73106

Creighton Collier 3127 S. Quaker Rd Tulsa, OK 74114

Daniel R. Ede PO Box 702334 Tulsa, OK 74170

Diagnostic Imaging 4500 S Garnett, Ste 919 Tulsa, OK 74146

Dopps Wellness 8114 W Central Wichita, KS 67212

Emergency Management Assoc PC 10501 E 91St St Tulsa, OK 74133

Equinox Collection Service 10159 E. 11th Street, Ste 500 Tulsa, OK 74128

ERC PO Box 57547 Jacksonville, FL 32241

Estancia Apartments 7705 S Mingo Rd Tulsa, OK 74133

Financial Corporation of America PO Box 203500 Austin, TX 78720

First National Collection Bureau PO Box 51660 Sparks, NV 89435

First Premier 3820 N Louise Ave Sioux Falls, SD 57107 First Premier 3820 N Louise Ave Sioux Falls, SD 57107

Firstpoint Collection Resources PO Box 26140 Greensboro, NC 27402

FNB Omaha PO Box 3412 Omaha, NE 68197

Heritage Veterinary Hospital 4011 S 79th E Ave Tulsa, OK 74145

Hillcrest Medical Center 1120 S Utica Ave Tulsa, OK 74104

Immediate Medical Care 4722 W Kellogg Wichita, KS 67209

Internal Revenue Service PO Box 21126 Philadelphia, PA 19114

Jacob's learning ladder 5002 E Douglas Ave Wichita, KS 67208

Jefferson Capital Systems 16 McLeland Rd St. Cloud, MN 56303

Kansas Counselors Ince 1421 N Saint Paul St Wichita, KS 67203

Mars Inc 4530 S Sheridan Rd Ste 106 Tulsa, OK 74105

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Medical Revenue Service PO Box 1940 Melbourne, FL 32902

Navient Solutions PO Box 9655 Wilkes Barre, PA 18773 Nelnet PO Box 82561 Lincoln, NE 68501

Patsy Barker 315 N Hillside St #B Wichita, KS 67214

Preventive Family Dentistry 6539 E 31st St #28 Tulsa, OK 74145

Radiology Consultants 4111 S Darlington Pl #700 Tulsa, OK 74135

Randy McCormick, DDS 1701 S. Peoria ave Tulsa, OK 74120

Regional Medical Laboratory 9330 E 41st St Tulsa, OK 74145

Robert L Hill Jr 7700 N Hudson Ave., Ste 10 Oklahoma City, OK 73116

Saint Francis Hospital 6161 S Yale Ave Tulsa, OK 74136

Saint Francis Hospital South 10501 E 91st St Tulsa, OK 74133

Saint John Medical Center 1923 S Utica Tulsa, OK 74104

Shadow Mountain Behavorial 6262 S Sheridan Rd Tulsa, OK 74133

St John Emergency Physicians PO Box 21228 Dept 334 Tulsa, OK 74121

St. John Clinic attn #13292x PO Box 14000 Belfast, ME 04915 Synchrony Bank PO Box 105972 Atlanta, GA 30348

The Dermatology Clinic 835 N Hillside Wichita, KS 67214

The Orthopaedic Center 1809 E 13th St Tulsa, OK 74104

Tulsa Adjustment Bureau 1754 Utica Square #28 Tulsa, OK 74114

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Tulsa OB Gyn Associates 2000 S Wheeling Ave #800 Tulsa, OK 74104

Tulsa Radiology Associates 4111 S Darlington Pl #700 Tulsa, OK 74135

Tulsa Women's Healthcare 10011 S Yale Ave #100 Tulsa, OK 74137

United Recovery Systems PO Box 72299 Houston, TX 77272

USAA Savings Bank 10750 McDermott Freeway San Antonio, TX 78288

Utica Park Clinic 1145 S Utica Tulsa, OK 74104 Warren Clinic 6161 S Yale Ave Tulsa, OK 74136

Works and Lentz 1437 S Boulder Ave Ste 900 Tulsa, OK 74119

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